

# CLAIMS ONLY

SERIAL NO.	FILING DATE
APPLICANT(S)	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3	1					
4	1					
5		1				
6	1					
7		1				
8		1				
9	1					
10	1					
11	1					
12	1					
13		1				
14	1					
15	1					
16	1					
17		1				
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42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	2					
TOTAL DEP.	15					
TOTAL CLAIMS	17					

	*	*	*	*
	IND.	DEP.	IND.	DEP.
51				
52				
53				
54				
55				
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58				
59				
60				
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62				
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94				
95				
96				
97				
98				
99				
100				
TOTAL IND.				
TOTAL DEP.				
TOTAL CLAIMS				

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS